
HOUSE RESOLUTION

REQUESTING THE DEPARTMENT OF HUMAN SERVICES AND DEPARTMENT OF HEALTH TO NOT CONSIDER CERTAIN BENEFITS UNDER TITLE II OF THE SOCIAL SECURITY ACT AS INCOME WHEN DETERMINING MEDICAID ELIGIBILITY AND TO ADOPT RULES TO ALLOW A PROVIDER OF MEDICAID ADULT DAY HEALTH SERVICES TO BILL IN FIFTEEN MINUTE INCREMENTS.

1 WHEREAS, small developmental disability domiciliary homes
2 located in the community are vital components of the State's
3 services for individuals with developmental disabilities,
4 providing them with a home, meals, and general supervision; and
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6 WHEREAS, individuals with disabilities who have extremely
7 low income rely on federal supplemental security income ("SSI")
8 for living expenses, but SSI alone is grossly insufficient to
9 cover the cost of necessary residential and health care
10 services, particularly in settings such as community care foster
11 family homes, certified adult foster homes, and developmental
12 disability domiciliary homes; and
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14 WHEREAS, Hawaii has long recognized and addressed the
15 shortfall in living income by authorizing a state payment
16 supplemental to SSI under section 346-53(c), Hawaii Revised
17 Statutes; and
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19 WHEREAS, individuals with disabilities who have extremely
20 low income and rely on SSI also rely on the State's Medicaid
21 program for medical care and home and community based services
22 to maintain a healthy and productive life in the community; and
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24 WHEREAS, eligibility for Medicaid services is subject to a
25 Medicaid income qualification standard, and, in the case of some
26 individuals, the receipt of federal disability benefits under
27 Title II of the federal Social Security Act causes the
28 individual's total income to exceed the income qualification
29 standard for SSI and the state supplement to SSI and, as a
30 result, eligibility for Medicaid; and
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1 WHEREAS, when a Medicaid recipient's total income exceeds
2 the Medicaid income qualification standard, in order to retain
3 eligibility for Medicaid the individual must spend down all of
4 the recipient's income as cost share for Medicaid services until
5 the recipient's income equals an arbitrary "medically needy"
6 standard of \$469 per month, which is the only amount the
7 individual retains for personal expenses including room and
8 board and other non-medical expenses; and

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10 WHEREAS, the medically needy amount of \$469 is grossly
11 inadequate to cover an individual's living expenses in a
12 developmental disability domiciliary home, and the operator of
13 the home must then make a choice between evicting the individual
14 and absorbing the difference between the resident's income and
15 the cost of the resident's room, board, and services; and

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17 WHEREAS, in many cases, the cause of the individual's
18 income exceeding the Medicaid qualification standard is the
19 receipt of social security disability income under Title II of
20 the Social Security Act on the basis of blindness or disability
21 that began before the resident attained the age of twenty-two;
22 and

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24 WHEREAS, it appears that some states do not consider such
25 social security disability income, or the increase thereof, as
26 income when determining Medicaid eligibility, thereby
27 eliminating the need to spend down to the medically needy
28 standard; and

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30 WHEREAS, it appears that Hawaii and ten other states choose
31 whether or not to consider such income, and Hawaii has not
32 implemented a rule to not consider such amounts as income, which
33 causes extreme financial difficulty for affected individuals and
34 service providers; and

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36 WHEREAS, one vital Medicaid service for elderly and
37 disabled individuals is adult day health services, which are
38 provided by numerous providers in a variety of community
39 settings for individuals who are eligible for Medicaid; and

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41 WHEREAS, the Department of Health only allows providers to
42 bill for a six-hour full day or three-hour half day; as a



1 result, if a half day client is present for fewer than three
2 hours in one day, the provider can bill nothing, and if a full
3 day client is present for fewer than six hours in one day, the
4 provider can bill for only a half day; and


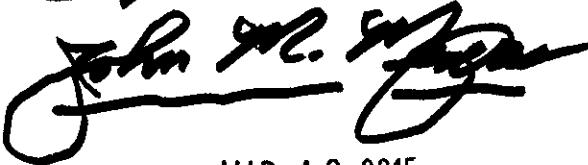
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6 WHEREAS, expenses are not reduced when a client is present
7 for less than a full or half day; therefore, providers should be
8 paid for services actually rendered; now, therefore,

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10 BE IT RESOLVED by the House of Representatives of the
11 Twenty-eighth Legislature of the State of Hawaii, Regular
12 Session of 2015, that the Department of Human Services and
13 Department of Health are requested to not consider as income the
14 Social Security Act Title II benefit or any increase in that
15 benefit if the benefit makes an individual ineligible for the
16 state supplement to SSI and Medicaid; and

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18 BE IT FURTHER RESOLVED that the Department of Human
19 Services and Department of Health are urged to take all actions
20 necessary to allow a provider of Medicaid home and community
21 based adult day health services to bill in fifteen minute
22 increments instead of full- or half-day increments; and

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24 BE IT FURTHER RESOLVED that certified copies of this
25 Resolution be transmitted to the Director of Human Services,
26 Director of Health, and Hawaii State Council on Developmental
27 Disabilities.

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30 OFFERED BY: 

MAR 12 2015

